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PTO/SB/01 (10-00)
Approved for use through 10/31/2002 OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	CRD-0938			
	First Named Inventor	Luis A. Davila et al.			
	COMPLETE IF KNOWN				
	Application Number				
	Filing Date				
	Group Art Unit				
	Examiner Name				
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: <div style="text-align: center;">IMPROVED RADIOPACITY INTRALUMINAL MEDICAL DEVICE (Title of the Invention)</div> the specification of which <input checked="" type="checkbox"/> is attached hereto OR <input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International Application Number <input type="text"/> and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					

09364729 "061901
T06T90" 694966

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/279,951	03/29/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
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AND

☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Carl J. Evens at telephone number (732) 524-2518.

Direct all correspondence to: Customer Number
☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

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Address:

Address:

City:

State:

ZIP

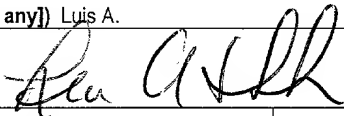
Country

Telephone:

Fax:

098473 064860 105790 624860

09884729 "061901

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Luis A.		Family Name or Surname Davila	
Inventor's Signature 		Date 6/13/01	
Residence: City Pleasanton	State CA	Country USA	Citizenship USA
Mailing Address 3527 Ballantyne Drive			
City Pleasanton	State CA	ZIP 94588	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Jorge		Family Name or Surname Mendez	
Inventor's Signature		Date	
Residence: City Miami	State FL	Country USA	Citizenship USA
Mailing Address 11751 S.W. 123rd Avenue			
City Miami	State FL	ZIP 33186	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alan R.		Family Name or Surname Pelton	
Inventor's Signature		Date	
Residence: City Fremont	State CA	Country USA	Citizenship USA
Mailing Address 421 Hillview Drive			
City Fremont	State CA	ZIP 94536	Country USA

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Karl K.

Family Name
or Surname Scheidt

Inventor's
Signature

Date

Residence: City Pembroke Pines

State FL

Country USA

Citizenship USA

Mailing Address 18185 N.W. 21st Street

City Pembroke Pines

State FL

ZIP 33029

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Douglas

Family Name
or Surname Shaw

Inventor's
Signature

Date

Residence: City Miami

State FL

Country USA

Citizenship USA

Mailing Address 20150 N.E. 3rd Court #8

City Miami

State FL

ZIP 33179

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James

Family Name
or Surname Silver

Inventor's
Signature

Date

Residence: City Redwood City

State CA

Country USA

Citizenship USA

Mailing Address 2894 Briarfield Avenue

City Redwood City

State CA

ZIP 94061

Country USA

09842306248860

09334729 "061501"
"061501"

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NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Christine		Family Name or Surname Trepanier	
Inventor's Signature		Date	
Residence: City Fremont	State CA	Country USA	Citizenship USA
Mailing Address 39469 Gallaudet Drive #312			
City Fremont	State CA	ZIP 94538	Country USA
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NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) David J.		Family Name or Surname Wilson	
Inventor's Signature		Date	
Residence: City Ft. Lauderdale	State FL	Country USA	Citizenship USA
Mailing Address 547 Cascade Falls Drive			
City Ft. Lauderdale	State FL	ZIP 33327	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF NINTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	CRD-0938	
	First Named Inventor	Luis A. Davila et al.	
	<i>COMPLETE IF KNOWN</i>		
	Application Number		
	Filing Date		
	Group Art Unit		
		Examiner Name	

☒ Declaration Submitted with Initial Filing
 OR
☐ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVED RADIOCAPACITY INTRALUMINAL MEDICAL DEVICE
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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DECLARATION - Utility or Design Patent Application

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60/279,951	03/29/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

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AND

☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Name:

Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Luis A.

Family Name

or Surname

Davila

Inventor's

Signature

Date

Residence: City Pleasanton

State CA

Country USA

Citizenship USA

Mailing Address 3527 Ballantyne Drive

City

Pleasanton

State CA

ZIP 94588

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Jorge, Orlando

Family Name

or Surname

Mendez

Inventor's

Signature

Date

Residence: City Miami

State FL

Country USA

Citizenship USA

Mailing Address 11751 S.W. 123rd Avenue

City

Miami

State FL

ZIP 33186

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Alan R.

Family Name

or Surname

Pelton

Inventor's

Signature

Date

Residence: City Fremont

State CA

Country USA

Citizenship USA

Mailing Address 421 Hillview Drive

City

Fremont

State CA

ZIP 94536

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Karl K.

Family Name

or Surname

Scheidt

**Inventor's
Signature**

Date

Residence: City Pembroke Pines

State FL

Country USA

Citizenship USA

Mailing Address 18185 N.W. 21st Street

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Pembroke Pines

State FL

ZIP 33029

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) William D.

Family Name

or Surname

Shaw, Jr.

**Inventor's
Signature**

Date

Residence: City Miami

State FL

Country USA

Citizenship USA

Mailing Address 20150 N.E. 3rd Court #8

City

Miami

State FL

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☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) James

Family Name

or Surname

Silver

**Inventor's
Signature**

Date

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State CA

Country USA

Citizenship USA

Mailing Address 2894 Briarfield Avenue

City

Redwood City

State CA

ZIP 94061

Country USA

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NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Christine

Family Name

or Surname

Trepanier

Inventor's

Signature

Date

Residence: City Fremont

State CA

Country USA

Citizenship USA

Mailing Address 39469 Gallaudet Drive #312

City

Fremont

State CA

ZIP 94538

Country USA

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NAME OF EIGHTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) David J.

Family Name

or Surname

Wilson

Inventor's

Signature

Date

Residence: City Ft. Lauderdale

State FL

Country USA

Citizenship USA

Mailing Address 547 Cascade Falls Drive

City

Ft. Lauderdale

State FL

ZIP 33327

Country USA

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NAME OF NINTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name

or Surname

Inventor's

Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

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Please type a plus sign (+) inside this box ☐

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Examiner Name				
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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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City:

State:

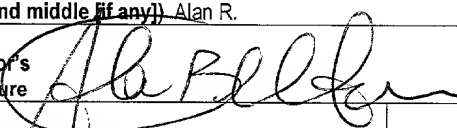
ZIP

Country

Telephone:

Fax:

0933473 "06194
10679" 644960

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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Luis A.		Family Name or Surname Davila	
Inventor's Signature		Date	
Residence: City Pleasanton	State CA	Country USA	Citizenship USA
Mailing Address 3527 Ballantyne Drive			
City Pleasanton	State CA	ZIP 94588	Country USA
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Jorge		Family Name or Surname Mendez	
Inventor's Signature		Date	
Residence: City Miami	State FL	Country USA	Citizenship USA
Mailing Address 11751 S.W. 123rd Avenue			
City Miami	State FL	ZIP 33186	Country USA
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alan R.		Family Name or Surname Pelton	
Inventor's Signature 		Date 14 JUNE 2001	
Residence: City Fremont	State CA	Country USA	Citizenship USA
Mailing Address 421 Hillview Drive			
City Fremont	State CA	ZIP 94536	Country USA

098473-06101
105790-624860

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Karl K.

Family Name

or Surname

Scheidt

Inventor's
Signature

Date

Residence: City Pembroke Pines

State FL

Country USA

Citizenship USA

Mailing Address 18185 N.W. 21st Street

City

Pembroke Pines

State FL

ZIP 33029

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Douglas

Family Name

or Surname

Shaw

Inventor's
Signature

Date

Residence: City Miami

State FL

Country USA

Citizenship USA

Mailing Address 20150 N.E. 3rd Court #8

City

Miami

State FL

ZIP 33179

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) James

Family Name

or Surname

Silver

Inventor's
Signature

Date

Residence: City Redwood City

State CA

Country USA

Citizenship USA

Mailing Address 2894 Briarfield Avenue

City

Redwood City

State CA

ZIP 94061

Country USA

0938473 061601
 52243360

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NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Christine		Family Name or Surname Trepanier	
Inventor's Signature		Date	
Residence: City Fremont	State CA	Country USA	Citizenship USA
Mailing Address 39469 Gallaudet Drive #312			
City Fremont	State CA	ZIP 94538	Country USA
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NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) David J.		Family Name or Surname Wilson	
Inventor's Signature		Date	
Residence: City Ft. Lauderdale	State FL	Country USA	Citizenship USA
Mailing Address 547 Cascade Falls Drive			
City Ft. Lauderdale	State FL	ZIP 33327	Country USA
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NAME OF NINTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	CRD-0938
	First Named Inventor	Luis A. Davila et al.
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVED RADIOPACITY INTRALUMINAL MEDICAL DEVICE
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number
 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/279,951	03/29/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
Label Here

AND

☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Carl J. Evens at telephone number (732) 524-2518.

Direct all correspondence to: Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

Name:

Address:

Address:

City:

State:

ZIP

Country

Telephone:

Fax:

0984729 067001

09884729 "061501

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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Luis A.		Family Name or Surname Davila	
Inventor's Signature		Date	
Residence: City Pleasanton	State CA	Country USA	Citizenship USA
Mailing Address 3527 Ballantyne Drive			
City Pleasanton	State CA	ZIP 94588	Country USA
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Jorge		Family Name or Surname Mendez	
Inventor's Signature		Date	
Residence: City Miami	State FL	Country USA	Citizenship USA
Mailing Address 11751 S.W. 123rd Avenue			
City Miami	State FL	ZIP 33186	Country USA
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alan R.		Family Name or Surname Pelton	
Inventor's Signature		Date	
Residence: City Fremont	State CA	Country USA	Citizenship USA
Mailing Address 421 Hillview Drive			
City Fremont	State CA	ZIP 94536	Country USA

106790" 624360

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Karl K.

Family Name

or Surname Scheidt

Inventor's
Signature



Date

6/16/01

Residence: City Pembroke Pines

State FL

Country USA

Citizenship USA

Mailing Address 18185 N.W. 21st Street

City

Pembroke Pines

State FL

ZIP 33029

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Douglas

Family Name

or Surname Shaw

Inventor's
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Date

Residence: City Miami

State FL

Country USA

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Miami

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ZIP 33179

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) James

Family Name

or Surname Silver

Inventor's
Signature

Date

Residence: City Redwood City

State CA

Country USA

Citizenship USA

Mailing Address 2894 Briarfield Avenue

City

Redwood City

State CA

ZIP 94061

Country USA

09034729-0614
T06T90-624360

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NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Christine		Family Name or Surname Trepanier	
Inventor's Signature		Date	
Residence: City Fremont	State CA	Country USA	Citizenship USA
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NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) David J.		Family Name or Surname Wilson	
Inventor's Signature		Date	
Residence: City Ft. Lauderdale	State FL	Country USA	Citizenship USA
Mailing Address 547 Cascade Falls Drive			
City Ft. Lauderdale	State FL	ZIP 33327	Country USA
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NAME OF NINTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	CRD-0938
	First Named Inventor	Luis A. Davila et al.
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

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the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/279,951	03/29/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
Label Here

AND

☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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City:

State:

ZIP

Country

Telephone:

Fax:

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Luis A.

Family Name

or Surname

Davila

**Inventor's
Signature**

Date

Residence: City Pleasanton

State CA

Country USA

Citizenship USA

Mailing Address 3527 Ballantyne Drive

City

Pleasanton

State CA

ZIP 94588

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Jorge, Orlando

Family Name

or Surname

Mendez

**Inventor's
Signature**

Date

Residence: City Miami

State FL

Country USA

Citizenship USA

Mailing Address 11751 S.W. 123rd Avenue

City

Miami

State FL

ZIP 33186

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Alan R.

Family Name

or Surname

Pelton

**Inventor's
Signature**

Date

Residence: City Fremont

State CA

Country USA

Citizenship USA

Mailing Address 421 Hillview Drive

City

Fremont

State CA

ZIP 94536

Country USA

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☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Karl K.

Family Name

or Surname

Scheidt

Inventor's
Signature

Date

Residence: City Pembroke Pines

State FL

Country USA

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Mailing Address 18185 N.W. 21st Street

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Pembroke Pines

State FL

ZIP 33029

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) William D.

Family Name

or Surname

Shaw, Jr.

Inventor's
Signature

Date

Residence: City Miami

State FL

Country USA

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Mailing Address 20150 N.E. 3rd Court #8

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☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) James

Family Name

or Surname

Silver

Inventor's
Signature

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State CA

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NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Christine

Family Name

or Surname

Trepanier

Inventor's

Signature

Date

Residence: City Fremont

State CA

Country USA

Citizenship USA

Mailing Address 39469 Gallaudet Drive #312

City

Fremont

State CA

ZIP 94538

Country USA

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NAME OF EIGHTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) David J.

Family Name

or Surname

Wilson

Inventor's

Signature

Date

Residence: City Ft. Lauderdale

State FL

Country USA

Citizenship USA

Mailing Address 547 Cascade Falls Drive

City

Ft. Lauderdale

State FL

ZIP 33327

Country USA

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NAME OF NINTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name

or Surname

Inventor's

Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

09884729-0648860

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	CRD-0938			
	First Named Inventor	Luis A. Davila et al.			
	COMPLETE IF KNOWN				
	Application Number				
	Filing Date				
	Group Art Unit				
	Examiner Name				
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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					

T06T90"6248860

T 0 5 7 9 0 " 6 3 4 8 5 0

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/279,951	03/29/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777**Place Customer
Number Bar Code
Label Here**AND**☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Carl J. Evens at telephone number (732) 524-2518.

Direct all correspondence to: ☒ Customer Number or Bar Code Label **000027777** OR ☐ Correspondence address below**Name:****Address:****Address:****City:****State:****ZIP****Country****Telephone:****Fax:**

T06T90"6248850

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this unsigned inventor**Given Name**
(first and middle [if any]) Luis A.**Family Name**
or Surname Davila**Inventor's**
Signature**Date****Residence: City** Pleasanton**State** CA**Country** USA**Citizenship** USA**Mailing Address** 3527 Ballantyne Drive**City** Pleasanton**State** CA**ZIP** 94588**Country** USA

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NAME OF SECOND INVENTOR:☐ A petition has been filed for this unsigned inventor**Given Name**
(first and middle [if any]) Jorge, Orlando**Family Name**
or Surname Mendez**Inventor's**
Signature**Date****Residence: City** Miami**State** FL**Country** USA**Citizenship** USA**Mailing Address** 11751 S.W. 123rd Avenue**City** Miami**State** FL**ZIP** 33186**Country** USA

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NAME OF THIRD INVENTOR:☐ A petition has been filed for this unsigned inventor**Given Name**
(first and middle [if any]) Alan R.**Family Name**
or Surname Pelton**Inventor's**
Signature**Date****Residence: City** Fremont**State** CA**Country** USA**Citizenship** USA**Mailing Address** 421 Hillview Drive**City** Fremont**State** CA**ZIP** 94536**Country** USA

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Karl K.

Family Name
or Surname Scheidt

Inventor's
Signature

Date

Residence: City Pembroke Pines

State FL

Country USA

Citizenship USA

Mailing Address 18185 N.W. 21st Street

City Pembroke Pines

State FL

ZIP 33029

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) William D.

Family Name
or Surname Shaw, Jr.

Inventor's
Signature

Date

Residence: City Miami

State FL

Country USA

Citizenship USA

Mailing Address 20150 N.E. 3rd Court #8

City Miami

State FL

ZIP 33179

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James

Family Name
or Surname Silver

Inventor's
Signature

Date

6/13/01

Residence: City Redwood City

State CA

Country USA

Citizenship USA

Mailing Address 2894 Briarfield Avenue

City Redwood City

State CA

ZIP 94061

Country USA

09884-061901

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NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Christine

Family Name
or Surname Trepanier

Inventor's
Signature

Date

Residence: City Fremont

State CA

Country USA

Citizenship USA

Mailing Address 39469 Gallaudet Drive #312

City Fremont

State CA

ZIP 94538

Country USA

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NAME OF EIGHTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) David J.

Family Name
or Surname Wilson

Inventor's
Signature

Date

Residence: City Ft. Lauderdale

State FL

Country USA

Citizenship USA

Mailing Address 547 Cascade Falls Drive

City Ft. Lauderdale

State FL

ZIP 33327

Country USA

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NAME OF NINTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	CRD-0938
	First Named Inventor	Luis A. Davila et al.
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVED RADIOCAPACITY INTRALUMINAL MEDICAL DEVICE
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number
 and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Application Number(s)	Filing Date (MM/DD/YYYY)	
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Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
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Label Here

AND

☐ Practitioner(s) named below:
Name Registration Number

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Name:

Address:

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State:

ZIP

Country

Telephone:

Fax:

0984739-061904

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Luis A.

Family Name

or Surname Davila

Inventor's
Signature

Date

Residence: City Pleasanton

State CA

Country USA

Citizenship USA

Mailing Address 3527 Ballantyne Drive

City Pleasanton

State CA

ZIP 94588

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Jorge

Family Name

or Surname Mendez

Inventor's
Signature

Date

Residence: City Miami

State FL

Country USA

Citizenship USA

Mailing Address 11751 S.W. 123rd Avenue

City Miami

State FL

ZIP 33186

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Alan R.

Family Name

or Surname Pelton

Inventor's
Signature

Date

Residence: City Fremont

State CA

Country USA

Citizenship USA

Mailing Address 421 Hillview Drive

City Fremont

State CA

ZIP 94536

Country USA

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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Karl K.

Family Name
or Surname Scheidt

Inventor's
Signature

Date

Residence: City Pembroke Pines

State FL

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Mailing Address 18185 N.W. 21st Street

City Pembroke Pines

State FL

ZIP 33029

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Douglas

Family Name
or Surname Shaw

Inventor's
Signature

Date

Residence: City Miami

State FL

Country USA

Citizenship USA

Mailing Address 20150 N.E. 3rd Court #8

City Miami

State FL

ZIP 33179

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James

Family Name
or Surname Silver

Inventor's
Signature

Date

Residence: City Redwood City

State CA

Country USA

Citizenship USA

Mailing Address 2894 Briarfield Avenue

City Redwood City

State CA

ZIP 94061

Country USA


09847-061901
"05790" 6224860

03644360 624360 06101

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NAME OF SEVENTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Christine		Family Name or Surname Trepanier	
Inventor's Signature		Date	
Residence: City Fremont	State CA	Country USA	Citizenship USA
Mailing Address 39469 Gallaudet Drive #312			
City Fremont	State CA	ZIP 94538	Country USA

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NAME OF EIGHTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) David J.		Family Name or Surname Wilson	
Inventor's Signature 		Date 6/14/01	
Residence: City Ft. Lauderdale	State FL	Country USA	Citizenship USA
Mailing Address 547 Cascade Falls Drive			
City Ft. Lauderdale	State FL	ZIP 33327	Country USA

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NAME OF NINTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

RECORDED AND OPENED TO ME ON
THIS 14TH DAY OF JUNE 2001
BY CLERK OF COURT
COURT OF APPEALS
IN THE DISTRICT OF COLUMBIA
NOT COMPLETED UNTIL FEB. 11, 2003

Please type a plus sign (+) inside this box
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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	CRD-0938	
<input checked="" type="checkbox"/> Declaration Submitted with Submitted after Initial Filing OR Declaration Initial Filing (Surcharge (37 CFR 1.16(e)) required)		First Named Inventor	Luis A. Davila et al.	
		COMPLETE IF KNOWN		
		Application Number		
		Filing Date		
		Group Art Unit		
		Examiner Name		
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: <div style="text-align: center;">IMPROVED RADIOCAPACITY INTRALUMINAL MEDICAL DEVICE (Title of the Invention)</div> the specification of which <input checked="" type="checkbox"/> is attached hereto OR <input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International Application Number <input type="text"/> and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO

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☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Luis A.

Family Name
or Surname Davila

Inventor's
Signature

Date

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State CA

Country USA

Citizenship USA

Mailing Address 3527 Ballantyne Drive

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Family Name
or Surname Mendez

Inventor's
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Citizenship USA

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NAME OF THIRD INVENTOR:

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Given Name
(first and middle [if any]) Alan R.

Family Name
or Surname Pelton

Inventor's
Signature

Date

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State CA

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Citizenship USA

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State CA

ZIP 94536

Country USA

106430-534360

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NAME OF FOURTH INVENTOR:

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Family Name
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NAME OF FIFTH INVENTOR:

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Given Name
(first and middle [if any]) William D.

Family Name
or Surname Shaw, Jr.

Inventor's
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Family Name
or Surname Silver

Inventor's
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State CA

ZIP 94061

Country USA

0988429-0494

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☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Christine

Family Name

or Surname Trepanier

Inventor's
Signature

Christine Trepanier

Date

06/14/01

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Citizenship ~~Canada~~
USA

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF EIGHTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) David J.

Family Name

or Surname Wilson

Inventor's
Signature

Date

Residence: City Ft. Lauderdale

State FL

Country USA

Citizenship USA

Mailing Address 547 Cascade Falls Drive

City Ft. Lauderdale

State FL

ZIP 33327

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF NINTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name

or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

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<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					

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